

INS. CASE OWNER:

CC6 / EQI 2000 9111 / Kgs3

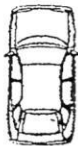
LKK:

IDAC:

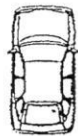
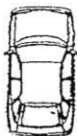
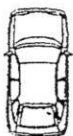
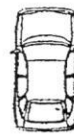
ASSIGNMENT

Surveyor: KennethDOI: 27/08/2020Date / Time : 28/08/2020Registered in Merimen: —

Pre-assign / CCU / FTE

Insured Vehicle No. : GBG 788AClaim No. : Name of Insured : SUNYU PRODUCTS & SERVICES PTE LTDPolicy No. : Insured Tel No. : HP: Make / Model : Excess Sec II : S\$ D.O.A : 26/08/2020Place of Accident : Is driver the owner? (YES / ☒ NO) Nature of Accident : If NO, Driver Name / Age : OI GIA REPORT: ☒ YES / NO ; TP GIA REPORT: ☒ YES / NODriver Tel No. : (V/L: ☒ YES / NO)Insured Liability : % Final ? Yes / No

SGG 8984M

INSRS:
WSP: HWA SENG
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS: INSRS:
WSP:
Tel :
Liability :
RMKS:

Date/ Time	SGG 8984M : X ; GBG 788A : X	STAGE	DATE / PIC
		Non-Reporting ltr (1st):	
		Non-Reporting ltr (2nd):	
		Non-Reporting ltr (Final):	
		Notification ltr (if non-pickup):	
		Call OI:	
		After call ltr to OI:	
		Documentation Check List:	Handler Typist
		Notification ltr (if non-pickup)	☐ ☐
		After call ltr to OI:	☐ ☐
		Authorisation To Act:	☐ ☐
		Release Voucher:	☐ ☐
		Final Repair Bill:	☐ ☐
		Car Rental Invoice:	☐ ☐
		Towing Invoice	☐ ☐
		LTA / GIA :	☐ ☐
		Medical Bill:	☐ ☐
		PIR:	☐ ☐
		Mandate/Reject Instruction:	☐ ☐
		LOD	☐ ☐
		Payment Breakdown Form:	☐ ☐
		Post-Repair Photos:	☐ ☐
		Others:	☐ ☐
PRELIMINARY ADVICE	Date/Time: <u> </u> Sent By: <u> </u>		
FINALIZATION	Date/Time: <u> </u> Confirm with: <u> </u> Confirm by: <u> </u>		
Repair Cost: L/S	S\$ 3350.00 (6 days) Reduction: 3495.37 % 51	Email ☒	Call ☐
FINAL SETTLEMENT	Date/Time: <u>10/12/2020</u> Confirm with <u>HWEE BOON</u>	Email ☒	Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : NIL	If NO or B 28, Ass. Lia :	
Repair Cost:	S\$ 3350.00		
Loss of Rental (LOR):	S\$ (days)		
Loss of Use (LOU):	S\$ 350.00 (\$ 50.00 x 7 days)		
Loss of Income (LOI):	S\$ (\$ x days)		
LOR only ☐ LOU only ☒	LOR + LOU ☐ LOR + LOI ☐ [Tick only one]		
GIA/LTA Search	S\$ 7.45		
Medical:	S\$	1) Claim status: ☒ Normal/Reject/Private Settle	
Disbursement:	S\$ (e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S\$	3) Survey fee: \$400.00	
Total:	S\$ 3707.45 Global Sum S\$: 3700.00		
FINAL PAYMENT	Date/Time: <u> </u> Confirm with: <u> </u>	Email ☒	Call ☐
Payee 1:	S\$ 3700.00 Name 1: <u>HWA SENG SPRAY PAINTING COMPANY</u>		
Payee 2: (Strike if N.A.)	S\$ Name 2: <u> </u>		
Payee 3: (Strike if N.A.)	S\$ Name 3: <u> </u>		

OI COMING OUT FROM MSCP ENTERING INTO MAIN RD / TP DRIVING STRAIGHT AT MAIN RD